

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>				
Full Name (Last, First, Middle Initial) of Payee BASELICE AND ASSOCIATES INC			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 4131 SPICEWOOD SPRINGS RD STE O-2			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 12500.00 </div>	
City AUSTIN State TX Zip Code 78759		Transaction ID : SE24-0.031719		
Purpose of Expenditure SURVEY RESEARCH		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ANN KIRKPATRICK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1163441.16 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 815 SLATERS LANE			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 214467.69 </div>	
City ALEXANDRIA State VA Zip Code 22314		Transaction ID : SE24-0.031625		
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ANN KIRKPATRICK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1163441.16 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 226967.69 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>	
(c) TOTAL Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 226967.69 </div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>				
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> KEITH DAVIS Signature </div> <div style="text-align: center;"> [Electronically Filed] Date </div> <div style="text-align: center;"> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div> </div> </div>				

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee SRCP MEDIA		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 10 / 05 / 2012
Mailing Address 201 N UNION ST. SUITE 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22486.00</div>
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: ANN KIRKPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1163441.16</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE24-0.031720

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> 10 / 05 / 2012
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">208094.00</div>
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: KYRSTEN SINEMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">673110.92</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE24-0.031629

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">230580.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

 10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

DMM MEDIA LLC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 3299 K ST NW

SUITE 200

City

WASHINGTON

State

DC

Zip Code

20007

Amount

24812.20

Transaction ID : SE24-0.031673

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 07

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

AMERISH BERA

Calendar Year-To-Date Per Election
for Office Sought

1161393.13

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 815 SLATERS LANE

City

ALEXANDRIA

State

VA

Zip Code

22314

Amount

502243.59

Transaction ID : SE24-0.031591

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 07

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

AMERISH BERA

Calendar Year-To-Date Per Election
for Office Sought

1161393.13

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

527055.79

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px;">498435.56</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031624
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: JERRY MCNERNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">1214754.66</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="border: 1px solid black; padding: 2px;">19500.44</div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031718
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: JERRY MCNERNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">1214754.66</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">517936.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature

Date

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

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D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

BASELICE AND ASSOCIATES INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 4131 SPICEWOOD SPRINGS RD

STE O-2

Amount

City

AUSTIN

State

TX

Zip Code

78759

12500.00

Transaction ID : SE24-0.031699

Purpose of Expenditure
SURVEY RESEARCHCategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 10

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JOSE M HERNANDEZ

Calendar Year-To-Date Per Election
for Office Sought

1161269.64

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

HONOLD COMMUNICATIONS

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 630 BROWN COURT SE

Amount

City

WASHINGTON

State

DC

Zip Code

20003

21333.69

Transaction ID : SE24-0.031700

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 10

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JOSE M HERNANDEZ

Calendar Year-To-Date Per Election
for Office Sought

1161269.64

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

33833.69

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 05 / 2012 </div>
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 498391.11 </div>
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24-0.031623	
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: JOSE M HERNANDEZ		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 05 / 2012 </div>
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 50000.00 </div>
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24-0.031635	
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: JOSE M HERNANDEZ		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 548391.11 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address PO BOX 16504		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20137.50</div>	
City ALEXANDRIA	State VA		
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : SE24-0.031717

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">102260.33</div>	
City ALEXANDRIA	State VA		
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : SE24-0.031622

(a) SUBTOTAL of Itemized Independent Expenditures.....	122397.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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KEITH DAVIS

Signature

[Electronically Filed]

Date

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06

2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee THE TARRANCE GROUP		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 201 N UNION ST STE 410		Amount 12500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031716
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 535373.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee RISING TIDE MEDIA GROUP LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 226 S FAYETTE		Amount 20381.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031727
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JULIA BROWNLEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 467196.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	32881.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY
 MM / DD / YYYY
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

BASSWOOD RESEARCH

Date

MM / DD / YYYY
 10 / 05 / 2012

Mailing Address 4550 MONTGOMERY AVE

STE 906

Amount

MM / DD / YYYY
 12500.00

City

BETHESDA

State

MD

Zip Code

20814

Transaction ID : SE24-0.031686

Purpose of Expenditure
SURVEY RESEARCHCategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 52

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

SCOTT PETERS

Calendar Year-To-Date Per Election
for Office Sought

MM / DD / YYYY
 1634570.53

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

CHRIS MOTTOLA CONSULTING, INC.

Date

MM / DD / YYYY
 10 / 05 / 2012

Mailing Address 1382 LAFAYETTE ST

Amount

MM / DD / YYYY
 22107.00

City

CAPE MAY

State

NJ

Zip Code

08204

Transaction ID : SE24-0.031687

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: CA

☐

Senate

District: 52

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

SCOTT PETERS

Calendar Year-To-Date Per Election
for Office Sought

MM / DD / YYYY
 1634570.53

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

MM / DD / YYYY
 34607.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

MM / DD / YYYY
 00000.00

(c) TOTAL Independent Expenditures.....▶

MM / DD / YYYY
 34607.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
 10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">353005.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031592
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 52
Name of Federal Candidate Supported or Opposed by Expenditure: SCOTT PETERS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1634570.53</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">503274.83</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031593
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1079818.83</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">856279.83</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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Y Y Y Y Y Y Y Y

10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL AND COMPANY LP			Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 3900 WILLOW ST STE 200			Amount <div style="border: 1px solid black; padding: 2px;">24600.00</div>	
City DALLAS	State TX	Zip Code 75226	Transaction ID : SE24-0.031670	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">1079818.83</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ANTHEM MEDIA INC			Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 5524 BEE CAVES RD STE B5			Amount <div style="border: 1px solid black; padding: 2px;">26170.00</div>	
City AUSTIN	State TX	Zip Code 78746	Transaction ID : SE24-0.031672	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: ALFRED J LAWSON JR			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">119196.16</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50770.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M

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D D D

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Y Y Y Y Y Y Y Y

10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 815 SLATERS LANE

City

ALEXANDRIA

State

VA

Zip Code

22314

Amount

76026.16

Transaction ID : SE24-0.031594

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: FL

☐

Senate

District: 02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

ALFRED J LAWSON JR

Calendar Year-To-Date Per Election
for Office Sought

119196.16

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

ONMESSAGE INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 2130 PRIEST BRIDGE DR # 11

City

CROFTON

State

MD

Zip Code

21114

Amount

17000.00

Transaction ID : SE24-0.031671

Purpose of Expenditure
SURVEY RESEARCHCategory/
Type

Office Sought:

☒

House

State: FL

☐

Senate

District: 02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

ALFRED J LAWSON JR

Calendar Year-To-Date Per Election
for Office Sought

119196.16

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

93026.16

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

ANTHEM MEDIA INC

Date

MM / DD / YYYY

Mailing Address 5524 BEE CAVES RD

STE B5

Amount

7086.67

City

AUSTIN

State

TX

Zip Code

78746

Transaction ID : SE24-0.031685

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒ House

State: GA

☐ Senate

District: 12

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

LEE ANDERSON

Calendar Year-To-Date Per Election
for Office Sought

995954.68

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

ANTHEM MEDIA INC

Date

MM / DD / YYYY

Mailing Address 5524 BEE CAVES RD

STE B5

Amount

21370.00

City

AUSTIN

State

TX

Zip Code

78746

Transaction ID : SE24-0.031683

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒ House

State: GA

☐ Senate

District: 12

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JOHN BARROW

Calendar Year-To-Date Per Election
for Office Sought

995954.68

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

28456.67

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee ANTHEM MEDIA INC			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 5524 BEE CAVES RD STE B5			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14173.33</div>	
City AUSTIN	State TX	Zip Code 78746	Transaction ID : SE24-0.031684	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BARROW			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">05</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 815 SLATERS LANE			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">154270.02</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031632	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BARROW			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	168443.35
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM

DD

YYYY

10

06

2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 30854.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031633
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: LEE ANDERSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 995954.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 106800.01	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031600
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID W LOEBSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 661379.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	137654.01
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 20000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031628
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID W LOEBSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 661379.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NORTH STAR OPINION RESEARCH		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 112 N ALFRED ST		Amount 12500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031713
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID W LOEBSACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 661379.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

ONMESSAGE INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 2130 PRIEST BRIDGE DR # 11

Amount

City

CROFTON

State

MD

Zip Code

21114

20461.78

Transaction ID : SE24-0.031714

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State:

IA

☐

Senate

District:

02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

DAVID W LOEBSACK

Calendar Year-To-Date Per Election
for Office Sought

661379.66

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

ONMESSAGE INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 2130 PRIEST BRIDGE DR # 11

Amount

City

CROFTON

State

MD

Zip Code

21114

11550.00

Transaction ID : SE24-0.031715

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State:

IA

☐

Senate

District:

02

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

DAVID W LOEBSACK

Calendar Year-To-Date Per Election
for Office Sought

661379.66

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

32011.78

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 119668.29	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031598	
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: LEONARD L BOSWELL			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 412899.03			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 30000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031634	
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 442513.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	149668.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 87224.24	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031590	
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTIE VILSACK			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 442513.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee MCCLESKEY MEDIA STRATEGIES			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 6100 UPTOWN BLVD STE 590			Amount 23500.00	
City ALBUQUERQUE	State NM	Zip Code 87110	Transaction ID : SE24-0.031712	
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY L DUCKWORTH			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 141179.03			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	110724.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 100679.03	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031595	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY L DUCKWORTH			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 141179.03			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR # 11			Amount 17000.00	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031711	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY L DUCKWORTH			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 141179.03			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	117679.03
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>10</div> <div>05</div> <div>2012</div> </div>	
Mailing Address 815 SLATERS LANE			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">399554.15</div>	
City ALEXANDRIA	State VA	Zip Code 22314		
Purpose of Expenditure MEDIA	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10		
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT JAMES DOLD			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : SE24-0.031599

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL AND COMPANY LP			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>10</div> <div>05</div> <div>2012</div> </div>	
Mailing Address 3900 WILLOW ST STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">23050.00</div>	
City DALLAS	State TX	Zip Code 75226		
Purpose of Expenditure MEDIA	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10		
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT JAMES DOLD			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : SE24-0.031676

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">422604.15</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 196380.10	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031602
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM L ENYART JR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 737830.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee AMERICAN VIEWPOINT INC		Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 300 N LEE ST STE 400		Amount 13300.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031694
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID GILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 585594.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	209680.10
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee DMM MEDIA LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 3299 K ST NW SUITE 200		Amount <div style="border: 1px solid black; padding: 2px;">23325.29</div>	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SE24-0.031695
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 13
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID GILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">585594.14</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px;">218726.22</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031601
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 13
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID GILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">585594.14</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	242051.51
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 24 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

ANTHEM MEDIA INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 5524 BEE CAVES RD

STE B5

Amount

City

AUSTIN

State

TX

Zip Code

78746

21794.31

Transaction ID : SE24-0.031675

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: IL

☐

Senate

District: 17

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CHERI BUSTOS

Calendar Year-To-Date Per Election
for Office Sought

1235789.30

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

MCLAUGHLIN AND ASSOCIATES INC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 566 S RT 303

Amount

City

BLAUVELT

State

NY

Zip Code

10913

12500.00

Transaction ID : SE24-0.031674

Purpose of Expenditure
SURVEY RESEARCHCategory/
Type

Office Sought:

☒

House

State: IL

☐

Senate

District: 17

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

CHERI BUSTOS

Calendar Year-To-Date Per Election
for Office Sought

1235789.30

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

34294.31

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 25 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 106751.12	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031596
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 17
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1235789.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 84543.22	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031603
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KY District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: A. B. CHANDLER III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 711834.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	191294.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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KEITH DAVIS

Signature

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Date

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 26 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount 18700.00	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031728
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KY District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: A. B. CHANDLER III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 711834.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 329601.10	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031604
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN F TIERNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1223392.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	348301.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 27 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>			
Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012 </div>	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 19400.00 </div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031721 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 06 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN F TIERNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 1223392.96 </div>	
Full Name (Last, First, Middle Initial) of Payee COLD HARBOR FILMS		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012 </div>	
Mailing Address 815 SLATERS LN		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 3670.56 </div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031701 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate Supported or Opposed by Expenditure: GARY J MCDOWELL		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 850713.16 </div>	
(a) SUBTOTAL of Itemized Independent Expenditures.....		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 23070.56 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 0.00 </div>	
(c) TOTAL Independent Expenditures.....		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 23070.56 </div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 40%;"> <p>KEITH DAVIS</p> <p>Signature</p> </div> <div style="width: 20%; text-align: center;"> <p><i>[Electronically Filed]</i></p> </div> <div style="width: 20%; text-align: center;"> <p>Date</p> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2012 </div> </div> <div style="width: 20%;"></div> </div>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 28 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 125397.90	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031611
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: GARY J MCDOWELL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 850713.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 195123.49	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031610
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD M NOLAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 903496.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	320521.39
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature

Date

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 29 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 188825.81	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031605
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: MIKE MCINTYRE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1423111.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 147866.25	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031626
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY W KISSELL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 813694.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	336692.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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MM / DD / YYYY

10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 30 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee PUBLIC OPINION STRATEGIES		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 214 N FAYETTE ST		Amount 12500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Transaction ID : SE24-0.031724
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY W KISSELL		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08
Calendar Year-To-Date Per Election for Office Sought 813694.39		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SRCP MEDIA		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 201 N UNION ST. SUITE 200		Amount 21105.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24-0.031725
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY W KISSELL		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08
Calendar Year-To-Date Per Election for Office Sought 813694.39		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	33605.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 31 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address PO BOX 16504		Amount 22537.50	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.031682
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 193444.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 153907.23	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031621
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 193444.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	176444.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 32 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 153887.23	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031630
Purpose of Expenditure MEDIA	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ANN MCLANE KUSTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 837977.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee DMM MEDIA LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 3299 K ST NW SUITE 200		Amount 22727.36	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SE24-0.031698
Purpose of Expenditure MEDIA	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1169397.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		176614.59	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">KEITH DAVIS</p> <p>Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 33 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 360391.64	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031606
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1169397.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount 12500.00	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031697
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN OCEGUERA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1169397.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	372891.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 34 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><small>M M M</small> /</div> <div><small>D D D</small> /</div> <div><small>Y Y Y Y Y Y Y Y</small></div> </div>	

Full Name (Last, First, Middle Initial) of Payee FABRIZIO MCLAUGHLIN AND ASSOCIATES INC		Date <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 10</div><div><small>D D D</small> 05</div><div><small>Y Y Y Y Y Y Y Y</small> 2012</div></div>	
Mailing Address 915 KING ST 2ND FL		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12500.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031702
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN A HORSFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1178235.76</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><small>M M M</small> 10</div><div><small>D D D</small> 05</div><div><small>Y Y Y Y Y Y Y Y</small> 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">364467.70</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031607
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN A HORSFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1178235.76</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	376967.70
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 35 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee REDPRINT STRATEGY LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 3000 S RANDOLPH ST APT 365		Amount 21241.56	
City ARLINGTON	State VA	Zip Code 22206	Transaction ID : SE24-0.031703
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN A HORSFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1178235.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee COLD HARBOR FILMS		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LN		Amount 6509.52	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031726
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY BISHOP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 383815.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27751.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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KEITH DAVIS

Signature

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 36 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 75225.40	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031608	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY BISHOP			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 383815.71			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 85262.21	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031627	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN P MALONEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 747281.81			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	160487.61
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 37 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL AND COMPANY LP			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 3900 WILLOW ST STE 200			Amount 22270.00	
City DALLAS	State TX	Zip Code 75226	Transaction ID : SE24-0.031696	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN P MALONEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 747281.81			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address PO BOX 16504			Amount 21365.00	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.031723	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JULIAN D SCHREIBMAN			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 947555.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	43635.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

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Signature

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 38 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 141857.05	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031631	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JULIAN D SCHREIBMAN			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 947555.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR # 11			Amount 12500.00	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031722	
Purpose of Expenditure SURVEY RESEARCH		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JULIAN D SCHREIBMAN			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 947555.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	154357.05
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 39 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">80334.49</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031609
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 21
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM OWENS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">388884.47</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">161470.18</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031597
Purpose of Expenditure MEDIA	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL B MAFFEI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">771924.83</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">241804.67</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 40 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14140.00</div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031729
Purpose of Expenditure SURVEY RESEARCH		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL B MAFFEI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">771924.83</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: flex; justify-content: space-around;"><div><div>M M M</div><div>/</div><div>D D D</div><div>/</div><div>Y Y Y Y Y Y Y</div></div><div>10 / 05 / 2012</div></div>	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18600.00</div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031730
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL B MAFFEI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">771924.83</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">32740.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 41 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee CHRIS MOTTOLA CONSULTING, INC.			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 1382 LAFAYETTE ST			Amount 21651.00	
City CAPE MAY	State NJ	Zip Code 08204	Transaction ID : SE24-0.031681	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY COURTNEY HOCHUL			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 248936.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 64146.23	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031612	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY COURTNEY HOCHUL			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 248936.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	85797.23
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 42 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee HONOLD COMMUNICATIONS		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 630 BROWN COURT SE		Amount 21458.28	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE24-0.031693
Purpose of Expenditure MEDIA	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES A WILSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 697069.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 202241.94	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031613
Purpose of Expenditure MEDIA	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES A WILSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 697069.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		223700.22	
(b) SUBTOTAL of Unitemized Independent Expenditures▶			
(c) TOTAL Independent Expenditures.....▶			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">KEITH DAVIS</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 43 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00075820 </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>			
Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 05 / 2012	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 12500.00 </div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031692 Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure SURVEY RESEARCH		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES A WILSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 697069.63 </div>			
Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 224272.48 </div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031614 Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 778536.42 </div>			
(a) SUBTOTAL of Itemized Independent Expenditures.....		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 236772.48 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 0.00 </div>	
(c) TOTAL Independent Expenditures.....		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 236772.48 </div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;"> KEITH DAVIS Signature </div> <div style="text-align: center;"> [Electronically Filed] Date </div> <div style="text-align: center;"> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div> 10 / 06 / 2012 </div> </div>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 44 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee BRABENDER COX		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 1218 GRANDVIEW AVE		Amount 23300.00	
City PITTSBURGH	State PA	Zip Code 15211	Transaction ID : SE24-0.031705
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1298313.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee FABRIZIO MCLAUGHLIN AND ASSOCIATES INC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 915 KING ST 2ND FL		Amount 12500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031704
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1298313.17		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	35800.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 45 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00075820</div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 815 SLATERS LANE			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 05 / 2012</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031620	
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> </div> 1298313.17			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ANTHEM MEDIA INC			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address 5524 BEE CAVES RD STE B5			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 05 / 2012</div>	
City AUSTIN	State TX	Zip Code 78746	Transaction ID : SE24-0.031708	
Purpose of Expenditure MEDIA		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEG0			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> </div> 1027525.09			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">169080.99</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 46 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee BASELICE AND ASSOCIATES INC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 4131 SPICEWOOD SPRINGS RD STE O-2		Amount 12500.00	
City AUSTIN	State TX	Zip Code 78759	Transaction ID : SE24-0.031706
Purpose of Expenditure SURVEY RESEARCH		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1027525.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address PO BOX 16504		Amount 25296.50	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.031707
Purpose of Expenditure MEDIA		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1027525.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	37796.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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Date

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10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 47 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 815 SLATERS LANE		Amount 284253.08
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure MEDIA	Category/Type	Transaction ID : SE24-0.031615
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEG0		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23
Calendar Year-To-Date Per Election for Office Sought 1027525.09		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN VIEWPOINT INC		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 300 N LEE ST STE 400		Amount 12500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Transaction ID : SE24-0.031677
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES D MATHESON		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 04
Calendar Year-To-Date Per Election for Office Sought 1076721.43		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	296753.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

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Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 48 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 220118.62	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031616
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES D MATHESON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1076721.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee NMB RESEARCH LLC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 214 N FAYETTE ST		Amount 1567.06	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031678
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: UT District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES D MATHESON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1076721.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	221685.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 49 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C

C00075820

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

SRCP MEDIA

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 201 N UNION ST.

SUITE 200

City

ALEXANDRIA

State

VA

Zip Code

22314

Amount

8000.00

Transaction ID : SE24-0.031679

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: UT

☐

Senate

District: 04

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JAMES D MATHESON

Calendar Year-To-Date Per Election
for Office Sought

1076721.43

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SRCP MEDIA

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 201 N UNION ST.

SUITE 200

City

ALEXANDRIA

State

VA

Zip Code

22314

Amount

21638.00

Transaction ID : SE24-0.031680

Purpose of Expenditure
MEDIACategory/
Type

Office Sought:

☒

House

State: UT

☐

Senate

District: 04

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

JAMES D MATHESON

Calendar Year-To-Date Per Election
for Office Sought

1076721.43

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

29638.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 50 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee FABRIZIO MCLAUGHLIN AND ASSOCIATES INC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 915 KING ST 2ND FL		Amount 12500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031709
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK KREITLOW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1045641.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date M M / D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE		Amount 299708.34	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031618
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK KREITLOW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1045641.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	312208.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 51 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SRCP MEDIA		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 201 N UNION ST. SUITE 200		Amount 20940.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031710
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK KREITLOW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1045641.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee AMERICAN VIEWPOINT INC		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 300 N LEE ST STE 400		Amount 12500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031688
Purpose of Expenditure SURVEY RESEARCH	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES R WALL JR		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 444844.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33440.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 52 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 132200.96	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031617	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES R WALL JR			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 444844.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL AND COMPANY LP			Date M M M / D D D / Y Y Y Y Y Y 10 / 05 / 2012	
Mailing Address 3900 WILLOW ST STE 200			Amount 22075.00	
City DALLAS	State TX	Zip Code 75226	Transaction ID : SE24-0.031689	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES R WALL JR			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 444844.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	154275.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

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Signature

Date

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 53 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee ANTHEM MEDIA INC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 5524 BEE CAVES RD STE B5			Amount 21376.00	
City AUSTIN	State TX	Zip Code 78746	Transaction ID : SE24-0.031691	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: NICK J RAHALL II			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 815560.54			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC			Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 815 SLATERS LANE			Amount 142302.23	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031619	
Purpose of Expenditure MEDIA		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: NICK J RAHALL II			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 815560.54			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	163678.23
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature

Date

MM / DD / YYYY
10 / 06 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 54 OF 54
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	

Full Name (Last, First, Middle Initial) of Payee ONMESSAGE INC		Date <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2130 PRIEST BRIDGE DR # 11		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12500.00</div>	
City CROFTON	State MD	Zip Code 21114	Transaction ID : SE24-0.031690
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: NICK J RAHALL II		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">815560.54</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">17000.00</div>	

Full Name (Last, First, Middle Initial) of Payee NMB RESEARCH LLC		Date <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	
Mailing Address 214 N FAYETTE ST		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17000.00</div>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.031735
Purpose of Expenditure SURVEY RESEARCH	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CAROL SHEA-PORTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">193444.73</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">10007798.77</div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">29500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">10007798.77</div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">10007798.77</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KEITH DAVIS

[Electronically Filed]

Signature _____ Date

M M M

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D D D

 /

Y Y Y Y Y Y Y Y